

**2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000004766

**Entity Name:** LIVVET LLC

**Current Principal Place of Business:**

2647 PROFESSIONAL CIRCLE  
SUITE 1203  
NAPLES, FL 34119

**Current Mailing Address:**

18 WYNSTONE WAY  
NORTH BARRINGTON, IL 60010

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

ELEANOR W. TAFT, P.A.  
2647 PROFESSIONAL CIRCLE  
SUITE 1203  
NAPLES, FL 34119 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:** \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Authorized Person(s) Detail :**

Title MGRM  
Name LACH, JOHN  
Address 18 WYNSTONE WAY  
City-State-Zip: NORTH BARRINGTON IL 60010

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** JOHN LACH

MANAGER

04/12/2013

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_ Date